

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		40	5/14/01
FORMALITY REVIEW	MD	579	6/25/01
RESPONSE FORMALITY REVIEW	TAP	1110	10-9-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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9	✓	✓	
10	✓	✓	
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Best Available Copy

If more than 150 claims or 10 actions
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4.5.
 6.25.01
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